Instruction 1(b)

FORM 4

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940.

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

	OMB APPROVAL									
	OMB Number:	3235-0287								
l	Estimated average burden									
1	hours per response:	0.5								

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1. Name and Address of Reporting Person* Fortanet Francisco						2. Issuer Name and Ticker or Trading Symbol INTERNATIONAL FLAVORS & FRAGRANCES INC [IFF]								5. Relationship of Reporting (Check all applicable) Director Officer (give title			Person(s) to Issuer 10% Owner Other (specify		
(Last) (First) (Middle) 521 WEST 57TH STREET						3. Date of Earliest Transaction (Month/Day/Year) 03/15/2019								X Officer (give title Other (specify below) EVP, Operations					
(Street) NEW YORK NY 10019 (City) (State) (Zip)							4. If Amendment, Date of Original Filed (Month/Day/Year)								G. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person				
		Tab	le I - No	n-Deriv	ative/	Sec	curitie	s Ac	quired	, Dis	posed o	f, or B	enefi	cially	Own	ed			
1. Title of S	Date	2. Transaction Date (Month/Day/Year)		2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transaction Code (Instr. 8)		4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4			and 5) Secu Bene Own		icially d Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership				
								Code	v	Amount	(A) (D)	Prio	e:e	Reported Transaction(s) (Instr. 3 and 4)			(Instr. 4)		
Common	Stock	/2019	2019			A		747(1)	A	\$1	24.59	16,	646.438	D					
Common	/2019				F		328(2)	D	\$1	\$124.59		318.438(3)	D						
Common Stock															33	3.138(4)	I	By 401k	
		Ta									osed of, onvertib				wned			•	
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deer Execution if any (Month/E		Date, Transacti Code (Ins				6. Date Expirati (Month/	on Da		Amount of Securities Underlying Derivative Security (Instrand 4)		Dei Sec (Ins	rivative curity str. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction ((Instr. 4)	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)	Date Exercisa		Expiration Date	Title	Number of Shares	r					

Explanation of Responses:

- 1. These shares represent the 50% portion of the reporting person's payout under the 2016-2018 Long Term Incentive Plan ("LTIP") cycle settled in shares of the issuer's common stock. The number of shares was determined based on the average closing market price of the issuer's common stock for the twenty trading days prior to January 2, 2016, the first stock trading day of the LTIP cycle.
- 2. Shares withheld to satisfy tax withholding obligations in connection with the receipt of shares under the LTIP.
- 3. Includes shares received pursuant to the dividend reinvestment plan in prior periods. The transactions were exempt pursuant to Rule 16a-11.
- 4. Includes shares acquired pursuant to periodic contributions during prior periods that were not previously reported and dividends paid on such shares. The transactions were exempt pursuant to Rule 16b-3(c) and Rule 16a-11.

/s/ Nanci Prado, attorney in fact

03/19/2019

** Signature of Reporting Person

Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

- * If the form is filed by more than one reporting person, see Instruction 4 (b)(v).
- ** Intentional misstatements or omissions of facts constitute Federal Criminal Violations See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB Number.